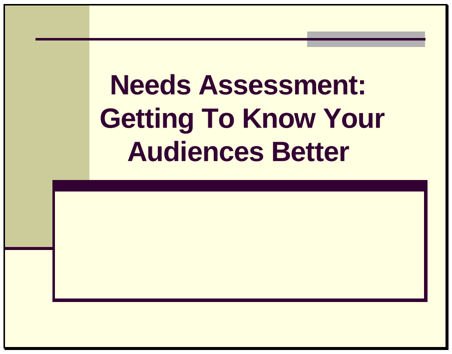
Module 2: Conducting a Needs Assessment

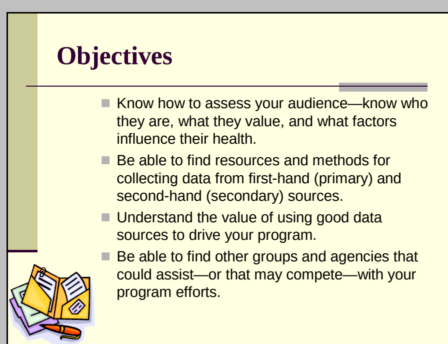
Slide 1



Purpose:

- Participants will learn basic ways to conduct a needs assessment and its role in the adaptation of evidence-based programs.

Slide 2



Objectives for the Lesson:

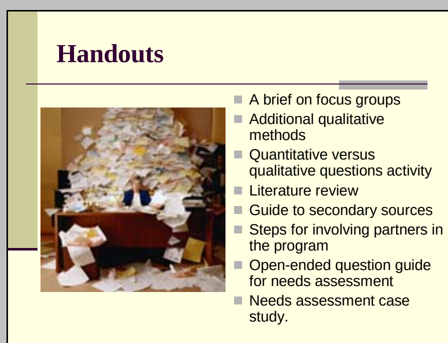
- By the end of this module, participants will be able to:
  - Assess their audience—who they are, what they value, and what factors influence their health
  - Be able to find resources and methods for collecting data from first-hand (primary) and second-hand (secondary) sources
  - Understand the value of using good data sources to drive your program
  - Be able to find other groups and agencies that could assist—or that may compete with—your program efforts.

Materials Required:

- Name tags or seat cards
- Paper for notes
- Pens
- Newsprint or chart paper
- Easel
- Masking tape
- LCD projector and screen
- Laptop with Internet access (if available)

  – Module 2: Needs Assessment Microsoft PowerPoint File

Slide 3



- Handouts

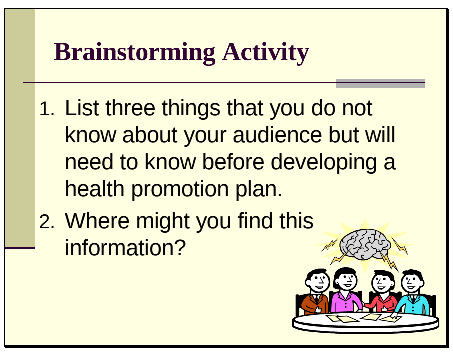
  – HO-1: Slide Handout
  – HO-2: A Brief on Focus Groups
  – HO-3: Additional Qualitative Methods
  – HO-4: Quantitative Versus Qualitative Questions Activity
  – HO-5: Literature Review
  – HO-6: Guide to Secondary Sources
  – HO-7: Steps for Involving Partners in the Program
  – HO-8: Open-Ended Question Guide for Needs Assessment
  – HO-9: Needs Assessment Case Study.

Lesson Outline

1. Activity 1: Brainstorming activity
2. Questions to answer about your audience
3. Primary sources for information collection
4. Activity 2: Taking a closer look at additional qualitative research methods
5. Optional Activity: Qualitative versus quantitative questions
6. Question guide
7. Secondary sources for information collection
8. Outcome of information collection
9. Establishing a baseline
10. Partnerships
11. Barriers
12. Case study activity
13. Closing.

Activity 1: Brainstorming Activity

Slide 4



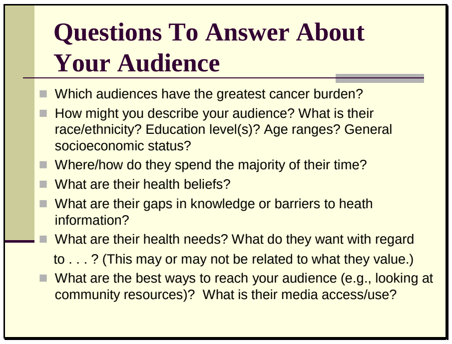
TRAINER: TALKING POINTS

- Ask participants to list three things that they do not know about their audience but will need to know before developing a health promotion plan.
- Ask participants to write down where they might find this information.
- Allow them 2 to 3 minutes to write down their items.
- Tell them that you will be using their lists throughout this session.
- Refer participants to Handout #1, Slide Handout, so they can follow along with the lecture.

Note to Presenter: The intent of this module is not to work through the basics of program design. Instead we hope to confirm that much of what is needed is already known.

Questions To Answer About Your Audience

Slide 5



TRAINER: TALKING POINTS

- Share the following with participants:
  - Begin by taking stock of certain features of your audience.
  - Getting information about the knowledge, perceptions, attitudes, motivation, and health practices of a group should come before program planning.
  - By writing down some of this information, you can plan better interventions.
  - Some questions to answer about your audience are:
    - Which audiences have the greatest cancer burden?
    - What is their race/ethnicity? Education level(s)? Age ranges? General socioeconomic status?
    - Where/how do they spend the majority of their time?
    - What are their health beliefs?
    - What are the health needs of your audience? What do they want? (This may or may not relate to what they value.)
    - What are the best ways to reach your audience (e.g., looking at community resources)?
    - What is their media access/use?

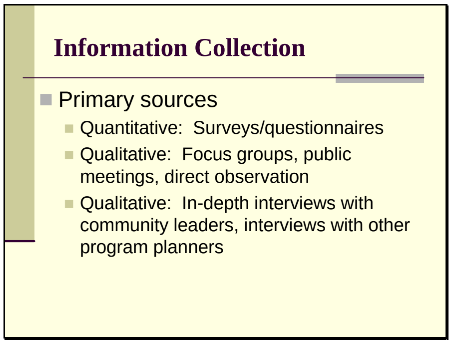
- Ask participants to look at the questions on slide #5 and compare them with the information that they listed during the opening activity.
  - Are they the same or different?
  - Is there something that you would like to add to the list?

- Ask participants to share responses with their table or group.

- Explain that data can be collected from primary and secondary sources.

Primary Sources for Information Collection

Slide 6



TRAINER: TALKING POINTS

- Share the following:

  – Primary data are gathered straight from the community.
  – They can be quantitative or qualitative.
  – Most of you will look for secondary data first, but you can gather primary data when you cannot find answers to your questions.

- Ask the group if they know the difference between quantitative and qualitative data.
- Explain as needed:

  – Quantitative data involve numbers and statistics. They include information such as multiple choice or 1- to 2-word answers that are easy to score.

    - Some say that these data answer the “what” of an issue.

  – Qualitative data collection uses questions that cannot be answered by yes or no. It collects information that cannot be easily explained by numbers.

    - It can include nonverbal cues as well. Or observations of the target group.

      – Some say that these data answer the “why” of an issue.

- Continue talking about primary data.

  – Examples of primary data collection methods include:

    - Quantitative: survey/questionnaires
    - Qualitative (group): focus groups, public meetings, direct observation

- Qualitative (one-on-one): in-depth interviews, key informant interviews with the following:
    - Community leaders or fellow program planners
  - These data collection methods can also find key members of the community who should be involved in the program planning. For example, community leaders can help describe cultural beliefs. Or they can describe the best way to channel health messages.

- Primary data collection need not be hard or time consuming. There are ways to obtain and analyze primary data rapidly.
  - For example, you can do a kind of sampling, where you recruit a few participants and then ask them to recruit friends, coworkers, etc.

- For more information on focus groups, participants can look over Handout #2: A Brief on Focus Groups.

Note to Presenter: Some groups may be more familiar with focus group testing than others. The following are optional talking points to use for groups who need more discussion of focus groups.

TRAINER: TALKING POINTS (OPTIONAL)
Handout #2 discusses the difference between focus groups and individual interviews. We can see that focus groups gather many opinions, rely on group interaction, are led by moderators, and can be affected by group dynamics. Interviews involve one-on-one interaction, rely on personal experience, and can be affected by individual bias.

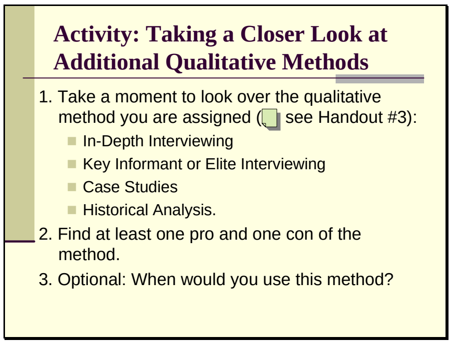
The handout also includes more information about focus groups such as group size, recruitment, the role of the moderator, and troubleshooting tips. Take a moment to read through the handout and let me know if you have any questions or discussion points.

Activity 2: Taking a Closer Look at Additional Qualitative Research Methods

TRAINER: TALKING POINTS

Tell participants that you will be doing an activity to further explore qualitative methods.

Slide 7



- Divide participants into small groups.
- Assign each group a qualitative data collection method.
- For help during this exercise, tell the group to refer to Handout #3: Additional Qualitative Methods.

TRAINER: TALKING POINTS

As we can see from Handout #3:

- In-Depth Interviewing

  - Can get the perspectives of members of your audience
  - Can vary from brief, casual talks to formal and lengthy discussions
  - For example: You are doing research on what college women know about HPV. You ask college females what they know about and their opinions on HPV.

- Key Informant or Elite Interviewing

  - Interviews with community leaders
  - Leaders are influential and well-informed people who can give you political, financial, or management information based on their position.
  - For example: You are doing research on what college women know about HPV.   You ask staff at the student health center about the prevalence of HPV on campus. Ask about the kinds of questions and concerns that college women have about HPV. You also interview presidents of sororities or other leaders in the college women's community.

- Case Studies

  - You can observe group dynamics by watching people in their own environment
  - You can look at a social unit. It could be a person, a family, a household, a workplace, a community, or any other kind of institution.
  - For example: You are doing research on what college women know about HPV. You visit bars, clubs, and other hangouts to learn what college women talk about in their social time. You try to listen for talk about sexual health or social interactions with men.

- Historical Analysis

  - You can get an account of events that happened in the past. It may include a way to interpret the impact of those events on current attitudes, values, and practices
  - Uses secondary sources (such as a framing study) and people who lived during that time.
  - For example: You are doing research on what college women know about HPV. You look for what has been printed about HPV and other sexually transmitted diseases by the college or local papers over the past 5 years.

- Assign a method to each group. Ask the group to take 3 minutes to think of at least one pro and one con of their assigned method.

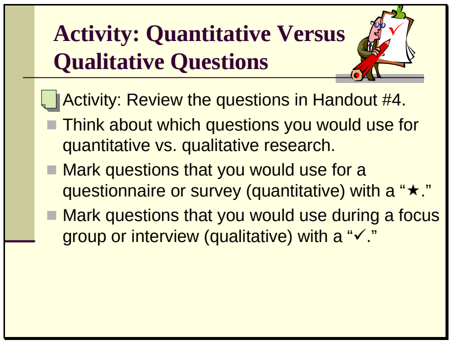
  - Optional: When would you use this method?

- Bring group back together to report on their results.

> ***Note to Presenter:*** Some groups may be more aware of the differences between quantitative and qualitative methods. The following activity can be used for those groups who need a review.

Optional Activity: Quantitative Versus Qualitative Questions

Slide 8



TRAINER: TALKING POINTS

- Refer participants to Handout #4: Quantitative Versus Qualitative Questions Activity.
- Ask them to take about 2 minutes to decide which questions capture quantitative vs. qualitative data.

  – Place a star next to those that are quantitative and a checkmark next to those that are qualitative.

- After 2 minutes, read through each question and ask for a show of hands of how people marked it.
- Remind the group that some questions are more clearly one kind of data or the other. Other questions may be used for both. In this case, it is simply a matter of rephrasing the questions.

Question Guide

TRAINER: TALKING POINTS

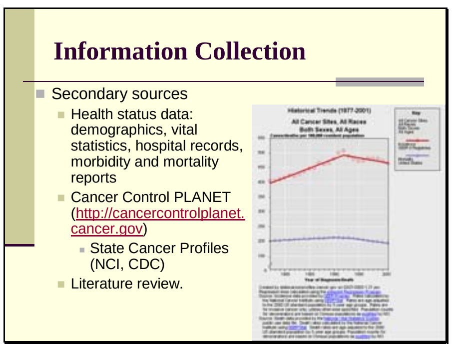
A question guide is useful when conducting qualitative research.

- Refer participants to Handout #8: Open-Ended Question Guide for Needs Assessment. Explain that this guide was developed for program planners to review when thinking about what to learn about their population.

  – Most often, you would select about 10 questions. Keep in mind that you may ask all 10 if answers are brief. But you can ask only a few questions if responses are in-depth or lead to different questions.
  – These questions can be used for talking with community leaders, brainstorming focus group questions, and so on.
  – Take a moment to review these questions.

Secondary Sources for Information Collection

Slide 9



TRAINER: TALKING POINTS

Now let's talk about secondary data.

- Share the following with participants:

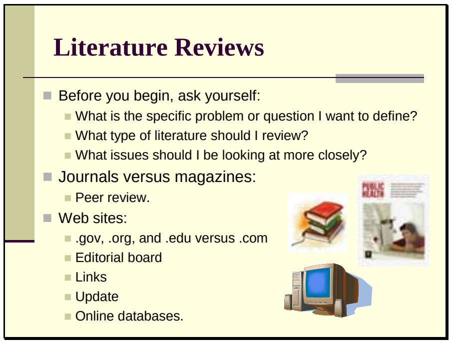
  – Secondary data come from research or data collection that others have done.
  – They can come from health status indicators, such as:

    - Demographics
    - Vital statistics
    - Hospital records
    - Morbidity/mortality reports.

– Data can also be found at:

- Cancer Control PLANET (http://cancercontrolplanet.cancer.gov/), Step 1 provides access to State cancer profiles
- Consumer Health Profiles, available from the National Cancer Institute by calling 1-800-4-CANCER.

Slide 10



TRAINER: TALKING POINTS

- Secondary data can also come from literature reviews. These can help you find effective programs and strategies.
- Refer participants to Handout #5: Literature Review and review the information with them. Let's review some points on Literature Reviews from Handout #5. There are some questions you will need to ask before you get started, as listed on the handout. There are also useful guidelines for evaluating Web sites, such as who maintains the site, if it has an editorial board, links to other sites, and when the site was last updated. Depending on the kind of information you are seeking, journal articles may be more useful than magazine articles. Journal articles have been reviewed by experts in the field while most magazine articles are vetted through a single source. Take a moment to review the rest of the handout and let me know if you have any questions or points for discussion.

Slide 11

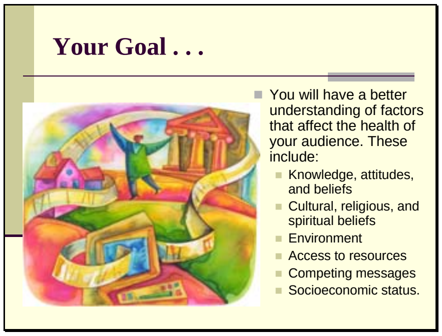
- Here is a review of useful Web sites. Some may have been mentioned already.

  – U.S. Census Bureau: http://www.census.gov/
  – National Center for Health Statistics: http://www.cdc.gov/nchs
  – State Cancer Profiles: http://statecancerprofiles.cancer.gov (can be accessed through the Cancer Control PLANET Web site, http://cancercontrolplanet.cancer.gov/)
  – American Cancer Society's Facts and Figures: http://www.cancer.org/docroot/STT/stt_0.asp.

- Refer participants to Handout #6: Guide to Secondary Sources. Here is a listing of the Web sites as well as some additional points for Web searches.

Outcome of Information Collection

Slide 12



TRAINER: TALKING POINTS

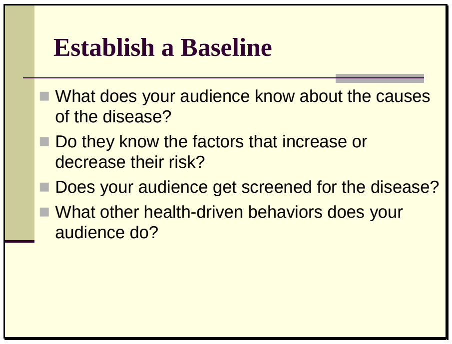
- Share the following:

  – In the end, after you review the data, you will have a better understanding of the factors that affect the health of a population. These include:

    - Knowledge, attitudes, and beliefs
    - Cultural, religious, and spiritual beliefs
    - Environment
    - Access to resources
    - Competing messages
    - Socioeconomic status.

Establishing a Baseline

Slide 13



TRAINER: TALKING POINTS

- Share the following:

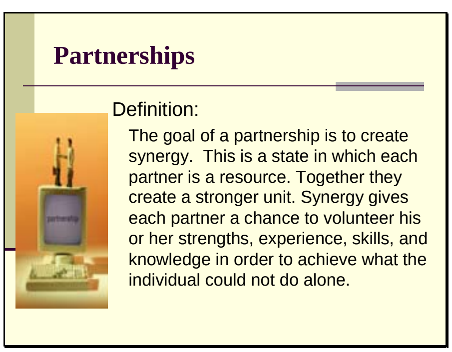
  – When you gather these data, they will help you establish a baseline for what your audience knows and what their behaviors are about a particular health issue.

    - Does your audience know what causes the disease? Can they identify factors that increase and decrease their risk for the disease?
    - Does your audience get screened for the disease? Do they take part in other healthy behaviors?

  – You need this baseline information to develop objectives and measure your progress.
  – You will learn more about objectives and goals in the next module.

Partnerships

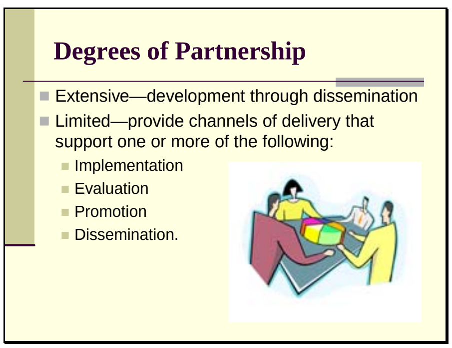
Slide 14



TRAINER: TALKING POINTS

- Share the following:
  - During a needs assessment you will learn about different groups and health initiatives in your target area.
  - Try to remember these different resources. Think about who can help support your program; in other words, who could become your partner?
- Review the definition of partnerships from the slide.
  - What roles might partners play?
    - Partnerships can enhance the quality of educational programs. They can provide outreach channels that help you conduct the program.

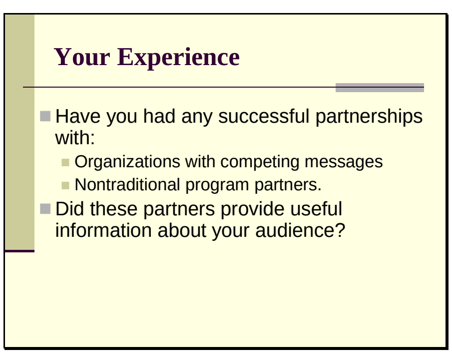
Slide 15



TRAINER: TALKING POINTS

- Partnerships can be extensive. A partner may be involved in the program from start to finish. Or it may be a limited partnership such as working with a group to distribute a flyer about a new booklet.

Slide 16



TRAINER: TALKING POINTS

- Have members of the group share their successful partnerships. Highlight those where partners had competing health messages or there were nontraditional program partners. (Some of these could be faith-based groups, labor unions, or social clubs.)

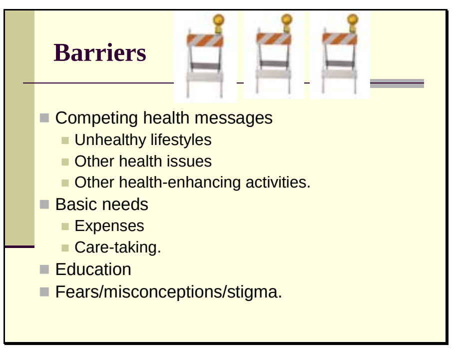
  – How did these partners help your program?

- Remind the group that they can find program and research partners on Step 2 on the Cancer Control PLANET Web site (http://cancercontrolplanet.cancer.gov/).
- Refer participants to Handout #7: Steps for Involving Partners in the Program and quickly review Handout #7 with them.

> ***Note to Presenter:*** Some groups may be more familiar with partnerships than others. If needed, review Handout #7: Steps for Involving Partners in the Program and ask participants if they have any questions or points for discussion.

Barriers

Slide 17



TRAINER: TALKING POINTS

- Share the following with the group:

  – Along with thinking about potential partners, also think about barriers to your program.
  – Be very much aware of other groups that may have competing interests or messages.

    - These groups do not need to be promoting unhealthy lifestyles, such as eating junk food or smoking. But they may be trying to promote another health issue that affects your audience.

      – For example, you may be competing with groups that raise awareness about heart disease or stroke.

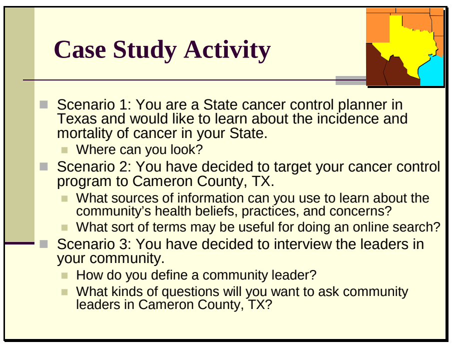
– Basic needs, like lack of money or family concerns, may also compete with your health message.
– By knowing more about the competition to your health message such as time, money, education, and interest, you can run more effective programs. The same is true if you can put basic needs into your health message, where possible.

- Ask the following:

  – How can you take into account competing health issues, basic needs, or unhealthy habits when looking for project partners?
  – Review answers in group discussion.

Case Study Activity

Slide 18



TRAINER: TALKING POINTS

- Explain that the goal of the group assignment is to have the group practice using the information from the lecture as if they were conducting their own needs assessment.
- Divide the participants into groups.

  – Give each group one of three scenarios:

    1. You are a State cancer control planner in Texas and would like to learn about the incidence and mortality of cancer in your State. Where can you look?

    2. You have decided to target your cancer control program to Cameron County, TX. What sources of information can you use to learn about the community's health beliefs, practices, and concerns?

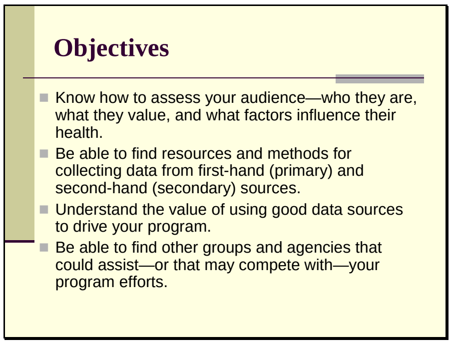
    3. You have decided to interview the leaders in your community. How do you identify community leaders? What kinds of questions will you want to ask community leaders in Cameron County, TX?

- Bring the group back together and have each group report back.

- Refer the group to Handout #9: Needs Assessment Case Study and use it as a reference when discussing the results from each group's activity. This handout provides possible answers that may or may not have been reported by the groups. Let's briefly review these results to see if they complement what was already reported.

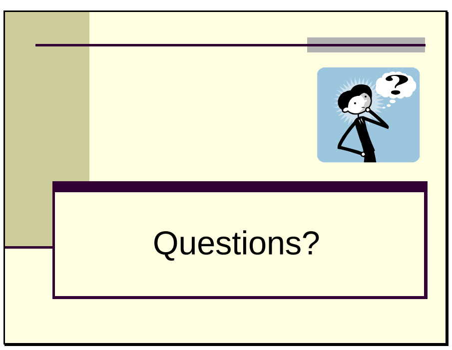
Closing

Slide 19



- Review module objectives.

Slide 20



- Ask whether there are any questions.
- Thank participants for their attention.